Attorney	Docket	No.
----------	--------	-----

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office and address and citizenship are as stated below next to my name,

inve the i	I believe I a ntor (if plural na nvention entitled	mes are listed b	rst and sole elow) of the	inventor (if or subject matte	ly one name is listed below) r which is claimed and for w	or an origina hich a patent	ll, first and joint is sought on
	"PROCESS I	OR HYDROPHOL	BICIZING I	PARTICLES,	AND THEIR USE IN DIS	PERSIONS"	
	-						
the s	specification of v	vhich (check one	∍)				
	is attached l	nereto	档	was filed on Serial No	November 22, 1999 PCT/CA99/01096	as Applic and was a (if applica	mended on
the c	I hereby stat claims, as amen	te that I have rev ded by any ame	viewed and ι ndment refe	understand th rred to above	e contents of the above-ider	ntified specific	ation, including
() Pacco ()	I acknowledgrdance with title	ge the duty to die 37, Code of Fe	sclose inforn deral Regula	nation which i itions, §1.56 (s material to the examinatio a).	n of the applic	cation in
d for pa	atent or inventoi	r's certificate list	ed below and	d have also ic	Jnited States Code, §119 of lentified below and foreign a ication on which priority is cl	polication for	application(s) patent or
	•			PRIOR FORE	EIGN APPLICATION(S)		
	2,254,559	Canada		20 Novemb	er 1998	Priorii 社	ty claimed □
The transfer than the state of	(Number)	(Country)		(Day/month/y	ear filed)	Yes	No
<u>.</u>	(Number)	(Country)		(Day/month/y	ear filed)	□ Yes	□ No
	(Number)	(Country)		(Day/month/y	ear filed)	□ Yes	. □ No
the di	v and, insofar as s application in t uty to disclose th	s the subject ma the manner prov ne material infor	tter of each or vided by the t mation as de	of the claims of first paragrap efined in Title	Code, §120 of any United Sof this application is not discin of Title 35, United States 037, Code of Federal Regula anational or PCT internation	losed in the p Code, §112, I tions, &1,56(a	rior United acknowledge
	(Application §	Serial No.)	(Filing Da	ate)	(STATUS: patented/pend	ing/abandone	ed)
	(Application S	Serial No.)	(Filing Da	ate)	(STATUS: patented/pend	ling/abandone	ed)

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

JOSEPH C. GIL, Patent Office Registration Number 26,602
ARON PREIS, Patent Office Registration Number 29,426
LYNDANNE M. WHALEN, Patent Office Registration Number 29,457
THOMAS W. ROY, Patent Office Registration Number 29,582
RICHARD E.L. HENDERSON, Patent Office Registration Number 31,619
GODFRIED R. AKORLI, Patent Office Registration Number 28,779
N. DENISE BROWN, Patent Office Registration Number 36,097
NOLAND J. CHEUNG, Patent Office Registration Number 39,138
CAROL MARMO, Patent Office Registration Number 39,761
DIDERICO VAN EYL, Patent Office Registration Number 38,641

all of Bayer Corporation, Pittsburgh, Pennsylvania 15205-9741

1-00

	SEND CORRESPONDENCE TO:	DIRECT TELEPHONE CALLS TO:
		(Name and telephone number) Patent Department (412) 777-2349
=		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF SOLE OR FIRST INVENTOR	INVENTORIO CIONATURE			
Ahti August Koski	INVENTOR'S SIGNATURE	PATE		
RESIDENCE	Chu (Megun Noon	CITZENSHIP		
	Ontario Carro NOD ODO	CITIZE ISHIP		
876 Brigden Road, R.R. #1, Wilkesport,	Untario, Canada NOP 2R0 CAX	Canadian		
	d Dittahamah DA 45005			
BAYER CORPORATION, 100 Bayer Roa	Id, Pittsburgh, PA 15205			
FULL NAME OF SECOND JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE		
RESIDENCE				
TESIDENSE		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL NAME OF THIRD JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE		
POST OFFICE ADDRESS		CITIZENSHIP		
POST OFFICE ADDRESS				
FULL MANE OF TOUR				
FULL NAME OF FOURTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE	DATE		
RESIDENCE				
RESIDENCE		CITIZENSHIP		
POST OFFICE ADDRESS				
TOOT OF THE ADDITESS				
FULL NAME OF FIFTH JOINT INVENTOR, IF ANY	INVENTOR'S SIGNATURE			
The state of the s	INVENTOR 3 SIGNATURE	DATE		
RESIDENCE		CITIZENIOLUD		
		CITIZENSHIP		
POST OFFICE ADDRESS				